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| Fill in this information to identify your case: | | |
|---|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| SOUTHERN DISTRICT OF OHIO | - | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself | | |
|-----|---|---|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). | Cody First name Ralph Middle name | First name Middle name |
| | Bring your picture identification to your meeting with the trustee. | Hinkle Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| 2. | All other names you have used in the last 8 years | | |
| | Include your married or maiden names. | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-3268 | |

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Debtor 1 Cody Ralph Hinkle Case number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|--|---|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | I have not used any business name or EINs. Business name(s) EINs | ☐ I have not used any business name or EINs. Business name(s) EINs |
| 5. | Where you live | 837 Ogden Road | If Debtor 2 lives at a different address: |
| | | Wilmington, OH 45177 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code |
| | | Clinton County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing this district to file for | Check one: | Check one: |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | | |

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Debtor 1 Cody Ralph Hinkle Document Page 3 of 50

Case number (if known)

| Pari | Tell the Court About | our B | ankruptcy Ca | ise | | | | |
|------|---|-------------|----------------|--------------------------------------|---|---|-----|--|
| 7. | The chapter of the Bankruptcy Code you are | | | | of each, see <i>Notice Required by</i> page 1 and check the appropriate | 11 U.S.C. § 342(b) for Individuals Filing for Bankrupto e box. | у | |
| | choosing to file under | ■ Chapter 7 | | | | | | |
| | | □ CI | hapter 11 | | | | | |
| | | □ Cl | hapter 12 | | | | | |
| | | □ cl | hapter 13 | | | | | |
| | | | | | | | | |
| 8. | How you will pay the fee | | about how yo | u may pay. Typio attorney is subm | cally, if you are paying the fee yo | k with the clerk's office in your local court for more deburself, you may pay with cash, cashier's check, or moalf, your attorney may pay with a credit card or check | ney | |
| | | | | | Illments. If you choose this option (Official Form 103A). | on, sign and attach the Application for Individuals to P | ay | |
| | | | | | | n only if you are filing for Chapter 7. By law, a judge mur income is less than 150% of the official poverty line | | |
| | | | applies to you | ur family size and | I you are unable to pay the fee in | n installments). If you choose this option, you must fill cial Form 103B) and file it with your petition. | | |
| | | | пе Аррпсанс | in to riave the Ci | iapter 7 Filling Fee Walved (Ollin | alai romi 103b) and me it with your petition. | | |
| 9. | Have you filed for bankruptcy within the | ■ No |). | | | | | |
| | last 8 years? | ☐ Ye | S. | | | | | |
| | | | District | | When | Case number | | |
| | | | District | | When | Case number | | |
| | | | District | | When | Case number | | |
| 10. | Are any bankruptcy | ■ No | | | | | | |
| | cases pending or being filed by a spouse who is | □ Ye | | | | | | |
| | not filing this case with you, or by a business partner, or by an affiliate? | | J. | | | | | |
| | | | Debtor | | | Relationship to you | | |
| | | | District | | When | Case number, if known | | |
| | | | Debtor | | | Relationship to you | | |
| | | | District | - | When | Case number, if known | | |
| 11. | Do you rent your | ■ Na | . Go to li | ine 12. | | | | |
| | residence? | ■ No | | | ned an eviction judgment agains | st vou? | | |
| | | ☐ Ye | is. Has yo | No. Go to line 1 | , , | . , , | | |
| | | | | | | Judgment Against You (Form 101A) and file it as part | of | |
| | | | Ц | this bankruptcy | | oughon Against Tou (Lotti ToTA) and the it as part | JI | |

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| Deb | tor 1 Cody Ralph Hinkle |) | | Document Pa | uge 4 of 50 Case number (if known) |
|-----|---|---------------|---------------------------|--|--|
| | | | | | |
| Par | Report About Any Bu | sinesses | You Owr | as a Sole Proprietor | |
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | |
| | | ☐ Yes. | Name | and location of business | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name | of business, if any | |
| | If you have more than one sole proprietorship, use a | | Numb | er, Street, City, State & ZIP Cod | е |
| | separate sheet and attach it to this petition. | | Chec | k the appropriate box to describe | your business: |
| | · | | | Health Care Business (as defin | ned in 11 U.S.C. § 101(27A)) |
| | | | | Single Asset Real Estate (as d | efined in 11 U.S.C. § 101(51B)) |
| | | | | Stockbroker (as defined in 11 l | J.S.C. § 101(53A)) |
| | | | | Commodity Broker (as defined | in 11 U.S.C. § 101(6)) |
| | | | | None of the above | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> debtor? | deadlines | s. If you in s, cash-f | dicate that you are a small busing ow statement, and federal incom | now whether you are a small business debtor so that it can set appropriate less debtor, you must attach your most recent balance sheet, statement of le tax return or if any of these documents do not exist, follow the procedure |
| | For a definition of small | ■ No. | I am ı | not filing under Chapter 11. | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am t Code | • | NOT a small business debtor according to the definition in the Bankruptcy |
| | | ☐ Yes. | I am f | ling under Chapter 11 and I am | a small business debtor according to the definition in the Bankruptcy Code. |
| Par | Report if You Own or | Have Any | Hazardo | us Property or Any Property 1 | hat Needs Immediate Attention |
| 14. | Do you own or have any | ■ No. | | | |
| | property that poses or is alleged to pose a threat | ☐ Yes. | | | |
| | of imminent and identifiable hazard to public health or safety? | — 100. | What is | the hazard? | |
| | Or do you own any property that needs immediate attention? | | | liate attention is why is it needed? | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs | | Where i | s the property? | |

Number, Street, City, State & Zip Code

urgent repairs?

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Debtor 1 Cody Ralph Hinkle

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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| Deb | tor 1 Cody Ralph Hinkl | е | | Case numbe | (if known) |
|------|--|--------------------------|------------------------------------|---|---|
| Part | 6: Answer These Quest | ions for Rep | orting Purposes | | |
| 16. | What kind of debts do you have? | | | mer debts? Consumer debts are defir , family, or household purpose." | ned in 11 U.S.C. § 101(8) as "incurred by an |
| | | | No. Go to line 16b. | | |
| | | | Yes. Go to line 17. | | |
| | | | | ess debts? Business debts are debts tent or through the operation of the busi | |
| | | | No. Go to line 16c. | | |
| | | | Yes. Go to line 17. | | |
| | | 16c. S | tate the type of debts you owe the | hat are not consumer debts or busines | s debts |
| 17. | Are you filing under Chapter 7? | □ No. I | am not filing under Chapter 7. G | to to line 18. | |
| | Do you estimate that after any exempt property is excluded and | | | ou estimate that after any exempt propole to distribute to unsecured creditors? | erty is excluded and administrative expenses |
| | administrative expenses | | No | | |
| | are paid that funds will be available for | |] Yes | | |
| | distribution to unsecured creditors? | | | | |
| 18. | How many Creditors do | 1 -49 | | □ 1,000-5,000 | □ 25,001-50,000 |
| | you estimate that you owe? | ☐ 50-99 | | ☐ 5001-10,000 | □ 50,001-100,000 |
| | owe: | □ 100-199 | | □ 10,001-25,000 | ☐ More than100,000 |
| | | □ 200-999 | | | |
| 19. | How much do you | □ \$0 - \$50 | ,000 | ☐ \$1,000,001 - \$10 million | ☐ \$500,000,001 - \$1 billion |
| | estimate your assets to be worth? | \$50,001 | - \$100,000 | □ \$10,000,001 - \$50 million | □ \$1,000,000,001 - \$10 billion |
| | | | 1 - \$500,000 | □ \$50,000,001 - \$100 million | □ \$10,000,000,001 - \$50 billion |
| | | □ \$500,00° | 1 - \$1 million | □ \$100,000,001 - \$500 million | ☐ More than \$50 billion |
| 20. | How much do you | □ \$0 - \$50 | ,000 | □ \$1,000,001 - \$10 million | ☐ \$500,000,001 - \$1 billion |
| | estimate your liabilities to be? | □ \$50,001 | | = \$10,000,001 - \$50 million | □ \$1,000,000,001 - \$10 billion |
| | | | 1 - \$500,000 | □ \$50,000,001 - \$100 million | □ \$10,000,000,001 - \$50 billion |
| | | \$500,00 | 1 - \$1 million | ☐ \$100,000,001 - \$500 million | ☐ More than \$50 billion |
| Part | 7: Sign Below | | | | |
| For | you | I have exam | nined this petition, and I declare | under penalty of perjury that the inform | nation provided is true and correct. |
| | | | | n aware that I may proceed, if eligible, available under each chapter, and I ch | under Chapter 7, 11,12, or 13 of title 11, oose to proceed under Chapter 7. |
| | | | | ay or agree to pay someone who is not tice required by 11 U.S.C. § 342(b). | t an attorney to help me fill out this |
| | | I request re | lief in accordance with the chapt | ter of title 11, United States Code, spec | cified in this petition. |
| | | | | | r property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519, |
| | | | Ralph Hinkle | | |
| | | Cody Ralp Signature o | | Signature of Debtor | |
| | | Executed or | October 15, 2019 | Executed on | |
| | | EXCOURGE OF | MM / DD / YYYY | | / DD / YYYY |
| | | | | | |

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Debtor 1 Cody Ralph Hinkle Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Harold Jarnicki | Date | October 15, 2019 |
|--|---------------|------------------|
| Signature of Attorney for Debtor | | MM / DD / YYYY |
| Harold Jarnicki #0027595 | | |
| Printed name | | |
| Harold Jarnicki and Associates | | |
| Firm name | | |
| 576 Mound Court, Suite B | | |
| Lebanon, OH 45036 | | |
| Number, Street, City, State & ZIP Code | | |
| Contact phone (513) 932-5792 | Email address | |
| #0027595 OH | | |
| Bar number & State | | |

| Cas | se 3:19-bk-33196 | Doc 1 Filed 1 | | ed 10/15/19 14:35: f 50 | 20 Desc Main |
|---------------------------------|--------------------------------|--|---|---|--------------------------------------|
| Fill in this info | ormation to identify your o | | V | | |
| Debtor 1 | Cody Ralph Hinkl | e Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| | Bankruptcy Court for the: | SOUTHERN DISTRICT | OF OHIO | | |
| Case number (if known) | | | | | ☐ Check if this is an amended filing |
| | orm 106Sum of Your Assets a | and Liabilities a | nd Certain Stat | istical Information | n 12/15 |
| Be as complete information. Fi | e and accurate as possib | le. If two married people es first; then complete t | e are filing together, be he information on this | oth are equally responsible form. If you are filing ame | |
| Part 1: Sum | marize Your Assets | | | | |

Your assets Value of what you own Schedule A/B: Property (Official Form 106A/B) 37,370.00 1a. Copy line 55, Total real estate, from Schedule A/B..... 1b. Copy line 62, Total personal property, from Schedule A/B..... 26,865.95 1c. Copy line 63, Total of all property on Schedule A/B..... 64,235.95 Part 2: Summarize Your Liabilities Your liabilities Amount you owe Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 141.051.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D... Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 0.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... 147,433.91 Your total liabilities \$ 288.484.91 Part 3: Summarize Your Income and Expenses Schedule I: Your Income (Official Form 106I) 2,060.00 Copy your combined monthly income from line 12 of Schedule I..... Schedule J: Your Expenses (Official Form 106J) 2,696.00 Copy your monthly expenses from line 22c of Schedule J..... Part 4: Answer These Questions for Administrative and Statistical Records Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

the court with your other schedules.

What kind of debt do you have?

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Debtor 1 Cody Ralph Hinkle Case number (if known)

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |
|----|--|
| | 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14. |

\$______2,573.85

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total clai | m |
|--|------------|----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 1,590.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 1,590.00 |

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| TIII IN TINIS INTOM | | | Cities as | . Page 10 01 50 | | | |
|--|---|--------------------|---|--|---|---|---|
| | mation to identify you | | filing: | | | | |
| Debtor 1 | Cody Ralph Hinl | Kle Middle Na | ame | Last Name | | | |
| Debtor 2 | | | | | | | |
| Spouse, if filing) | First Name | Middle Na | ame | Last Name | | | |
| Inited States Ba | ankruptcy Court for the: | SOUTHERN | DISTRICT OF | OHIO | | | |
| ase number | | | | | | | ☐ Check if this is a |
| | | | | | | | ☐ Check if this is a amended filing |
| N(() - () - () - () - (| 400A/D | | | | | | |
| | orm 106A/B | | | | | | |
| <u>ichedul</u> | le A/B: Prop | perty | | | | | 12/15 |
| Do you own or I ☐ No. Go to Par ☐ Yes. Where i | rt 2. | le interest in any | residence, buil | lding, land, or similar property? | | | |
| .1 837 Ogde Street address, | en Road , if available, or other description | <u> </u> | Single-fa | operty? Check all that apply amily home or multi-unit building inium or cooperative | the amount | of any secured | ims or exemptions. Put d claims on <i>Schedule D:</i> ns Secured by Property. |
| Wilmingto | on OH 45 | 177-0000 | ☐ Manufac | ctured or mobile home | Current val | | Current value of the portion you own? |
| | State | ZIP Code | = | ent property | | 4,740.00 | \$37,370.0 |
| City | | | ☐ Timesha | ıre | Docariba ti | | |
| City | | | _ | | (such as fee simple, te | | our ownership interest |
| City | | | Other | toward in the preparity? | (such as fe | e simple, tena | our ownership interest ancy by the entireties, c |
| City | | | Who has an int | terest in the property? Check one | (such as fe | ee simple, tena e), if known. | |
| Clinton | | | Who has an int | only | (such as fe a life estate | ee simple, tena e), if known. | |
| | | | Who has an int Debtor 1 Debtor 2 | only | (such as fe a life estate Fee simp | ee simple, tena e), if known. ole | ancy by the entireties, c |
| Clinton | | | Who has an int Debtor 1 Debtor 2 Debtor 1 | only 2 only | (such as fe a life estate Fee simp | ee simple, tena e), if known. ole | |
| Clinton | | | Who has an int Debtor 1 Debtor 2 Debtor 1 At least 0 Other informat | only conly and Debtor 2 only | (such as fe a life estate Fee simp | ee simple, tende), if known. ple a if this is cometructions) | ancy by the entireties, o |
| Clinton | | | Who has an int Debtor 1 Debtor 2 Debtor 1 At least 0 Other informat property identi | only 2 only and Debtor 2 only one of the debtors and another ion you wish to add about this ite | (such as fe a life estate Fee simp Check (see ins | ee simple, tena e), if known. ple s if this is com structions) | ancy by the entireties, c |
| Clinton | | | Who has an int Debtor 1 Debtor 2 Debtor 1 At least 0 Other informat property identi | only 2 only and Debtor 2 only one of the debtors and another ion you wish to add about this its fication number: | (such as fe a life estate Fee simp Check (see ins | ee simple, tena e), if known. ple s if this is com structions) | ancy by the entireties, c |
| Clinton | | | Who has an int Debtor 1 Debtor 2 Debtor 1 At least 0 Other informat property identi Deed in Dek | only 2 only and Debtor 2 only one of the debtors and another ion you wish to add about this its fication number: | (such as fe a life estate Fee simp Check (see ins em, such as lo | ee simple, tena e), if known. ple a if this is com attructions) | ancy by the entireties, o |

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

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| Debto | or 1 Cody Ralph Hinkle | | Case number (if known) | |
|-------|---|---|--------------------------------------|---|
| . Ca | rs, vans, trucks, tractors, sport utility ve | hicles, motorcycles | | |
| | No | | | |
| | | | | |
| _ | Yes | | | |
| 2.4 | Make· Kia | Who has an interest in the preparty? Challers | Do not deduct sec | ured claims or exemptions. Put |
| 3.1 | Make: KIA Model: Niro | Who has an interest in the property? Check one ☐ Debtor 1 only | the amount of any | secured claims on Schedule D: ve Claims Secured by Property. |
| | Year: 2019 | Debtor 2 only | | |
| | Approximate mileage: 22,000 Miles | Debtor 1 and Debtor 2 only | Current value of entire property? | the Current value of the portion you own? |
| | Other information: | At least one of the debtors and another | | |
| | Title in Debtor's Name and | | #00.00 | 100 044 000 00 |
| | Father Russell L. Hinkle's Name. | Check if this is community property (see instructions) | \$23,604 | l.00 \$11,802.00 |
| 3.2 | Make: Dodge | Who has an interest in the property? Check one | | ured claims or exemptions. Put secured claims on Schedule D: |
| | Model: Journey | Debtor 1 only | | ve Claims Secured by Property. |
| | Year: 2017 | Debtor 2 only | Current value of | the Current value of the |
| | Approximate mileage: 60,000 Miles | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| | Other information: | At least one of the debtors and another | | |
| | Title in Debtor's Name and Cosignor Coral Leslie Luke's Name. | Check if this is community property (see instructions) | \$21,879 | \$10,939.50 |
| | | on for all of your entries from Part 2, including | | \$22,741.50 |
| .pa | iges you have attached for Part 2. Write | that number here | => | |
| art 3 | Describe Your Personal and Household Ite | ems | | |
| Эо у | ou own or have any legal or equitable in | terest in any of the following items? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| E | usehold goods and furnishings camples: Major appliances, furniture, linens No | , china, kitchenware | | |
| | Yes. Describe | | | |
| | | | | |
| | Eating Utensils | Kitchen Chairs, Microwave, Cooking Ute , Cookware, Stove, Refrigerator, Living eds and Misc. Household Goods and Fu | Room | \$2,500.0 |
| Fle | ectronics | | | |
| Ex | | eo, stereo, and digital equipment; computers, pr nedia players, games | inters, scanners; music c | ollections; electronic devices |
| | Yes. Describe | | | |
| | | | , | 44 000 0 : |
| | TVs, Computer, | Printer, Cell Phone and Misc. Electroni | cs | \$1,000.00 |

Official Form 106A/B Schedule A/B: Property page 2

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| Debtor 1 | Cody Ralph Hir | kle Case number | r (if known) |
|---------------------------|--|---|---|
| - | | rines; paintings, prints, or other artwork; books, pictures, or other art objects; st memorabilia, collectibles | tamp, coin, or baseball card collections; |
| | Describe | | |
| Example ■ No | nent for sports and I les: Sports, photogra musical instrume | phic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, ski | s; canoes and kayaks; carpentry tools; |
| ■ No | ples: Pistols, rifles, sl | notguns, ammunition, and related equipment | |
| | Describe | | |
| □ No | | s, furs, leather coats, designer wear, shoes, accessories | |
| | Р | ersonal Clothing | \$200.00 |
| Exam _i □ No | arm animals ples: Dogs, cats, bird Describe | s, horses | |
| | Т | nree Dogs | \$0.00 |
| No Yes. | Give specific inform | II of your entries from Part 3, including any entries for pages you have attable there | |
| Do you ov | wn or have any lega | l or equitable interest in any of the following? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| ☐ No | | e in your wallet, in your home, in a safe deposit box, and on hand when you file | your petition |
| | | Cash | \$5.00 |
| | | | |
| | sits of money oples: Checking, savir | gs, or other financial accounts; certificates of deposit; shares in credit unions, b | prokerage houses, and other similar |

institutions. If you have multiple accounts with the same institution, list each.

☐ No

page 3

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| Debt | or 1 | Cody Ralph Hi | nkle | | Boodinent | | Case number (if known) | |
|--------------|--------------------------|--|----------|-----------------------------|--|---|--|--------------------------------|
| | Yes | | | | Institution | ı name: | | |
| | | | 17.1. | Checking | Wright I | Patt Credit Union | | \$414.39 |
| | | | 17.2. | Savings | Wright I | Patt Credit Union | | \$5.06 |
| | Examp No | mutual funds, or oles: Bond funds, in | vestme | | h brokerage firms, m | oney market account | ts | |
| 19. N | lon-pu oint v | | k and i | interests in inc | orporated and unin | corporated busines | sses, including an interes | et in an LLC, partnership, and |
| | No Yes. | Give specific inforr | | about them ne of entity: | | | % of ownership: | |
| | Vegotia | able instruments in | clude p | ersonal checks | , cashiers' checks, pr | -negotiable instrume romissory notes, and ne by signing or delive | I money orders. | |
| | Yes. | Give specific inform | | about them uer name: | | | | |
| | E <i>xamp</i> No | nent or pension acoles: Interests in IRA | A, ERIS | SA, Keogh, 401(| k), 403(b), thrift savir | ngs accounts, or othe | er pension or profit-sharing | plans |
| | | | Type o | of account: | Institution | n name: | | |
| | Your sl E <i>xamp</i> | | deposit | s you have mad | | ontinue service or use lectric, gas, water), te | e from a company elecommunications compar | nies, or others |
| | No Yes | | | | Institution | n name or individual: | | |
| | No | , | • | | | for life or for a numbe | er of years) | |
| | Yes | lssu | er nam | e and description | n. | | | |
| 26 | | s in an education C. §§ 530(b)(1), 529 | | | a qualified ABLE p | rogram, or under a | qualified state tuition pro | ogram. |
| | | Instit | tution n | ame and descri | ption. Separately file | the records of any in | nterests.11 U.S.C. § 521(c) | : |
| _ | rusts, No | equitable or futur | re inter | ests in proper | ty (other than anyth | ing listed in line 1), | and rights or powers exe | ercisable for your benefit |
| | Yes. | Give specific inform | mation | about them | | | | |
| | Examp No | oles: Internet domai | n name | es, websites, pro | s, and other intellec oceeds from royalties | ctual property s and licensing agree | ements | |
| | Yes. | Give specific inforr | mation | about them | | | | |
| | E <i>xamp</i> No | | ts, excl | usive licenses, | | ion holdings, liquor lid | censes, professional licens | es |
| | | Give specific inform | | about them | | | | |
| Mon | ev or i | property owed to | you? | | | | | Current value of the |

portion you own?

| | Do not deduct secured claims or exemptions. |
|---|---|
| 28. Tax refunds owed to you | |
| □ No | |
| ■ Yes. Give specific information about them, including whether you already filed the returns and the tax | years |
| | |
| 2019 Federal, State and Local Tax Refunds | Unknown |
| 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlem No ☐ Yes. Give specific information | nent, property settlement |
| 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, wo benefits; unpaid loans you made to someone else No ☐ Yes. Give specific information | rkers' compensation, Social Security |
| 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or re No | enter's insurance |
| Yes. Name the insurance company of each policy and list its value. | |
| Company name: Beneficiary: | Surrender or refund value: |
| | value: |
| Minnesota Life Insurance (Accidental Policy Only) Daughter is Beneficiary: Daughter is Beneficiary: | eficiary \$0.00 |
| Minnesota Life Insurance (Accidental Policy Only) Daughter is Ben 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently expected by the someone has died. No Yes. Give specific information. | eficiary \$0.00 entitled to receive property because |
| Minnesota Life Insurance (Accidental Policy Only) Daughter is Ben 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently esomeone has died. No Yes. Give specific information 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for paymer Examples: Accidents, employment disputes, insurance claims, or rights to sue | eficiary \$0.00 entitled to receive property because |
| Minnesota Life Insurance (Accidental Policy Only) Daughter is Ben 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently esomeone has died. No Yes. Give specific information 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for paymer Examples: Accidents, employment disputes, insurance claims, or rights to sue No | eficiary \$0.00 entitled to receive property because |
| Minnesota Life Insurance (Accidental Policy Only) Daughter is Ben 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently essomeone has died. No Yes. Give specific information 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payme Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim | eficiary \$0.00 entitled to receive property because |
| Minnesota Life Insurance (Accidental Policy Only) Daughter is Ben 22. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently expended as someone has died. No Yes. Give specific information 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for paymer Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim | eficiary \$0.00 entitled to receive property because ent and rights to set off claims |
| Minnesota Life Insurance (Accidental Policy Only) Daughter is Ben 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently esomeone has died. No Yes. Give specific information 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payme Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor No Yes. Describe each claim 35. Any financial assets you did not already list No Yes. Give specific information 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have | eficiary \$0.00 entitled to receive property because ent and rights to set off claims |

No. Go to Part 6.

 \square Yes. Go to line 38.

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| Debtor | 1 Cody Ralph Hinkle | | Case number (if known) | |
|----------------|---|--------------------------|------------------------------|-------------|
| | Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1. | u Own or Have an Interes | st In. | |
| 6. Do : | you own or have any legal or equitable interest in any farm | - or commercial fishir | ng-related property? | |
| | No. Go to Part 7. | | | |
| | Yes. Go to line 47. | | | |
| Part 7: | Describe All Property You Own or Have an Interest in That Yo | ou Did Not List Above | | |
| | you have other property of any kind you did not already list | 1? | | |
| Exc ■ N | | | | |
| | es. Give specific information | | | |
| | so. Sive speeme information | | | |
| 54. A c | ld the dollar value of all of your entries from Part 7. Write th | nat number here | ······ | \$0.00 |
| Part 8: | List the Totals of Each Part of this Form | | | |
| 55. P a | rt 1: Total real estate, line 2 | | | \$37,370.00 |
| 56. P a | rt 2: Total vehicles, line 5 | \$22,741.50 | | |
| 57. P a | rt 3: Total personal and household items, line 15 | \$3,700.00 | | |
| 58. P a | rt 4: Total financial assets, line 36 | \$424.45 | | |
| 59. P a | rt 5: Total business-related property, line 45 | \$0.00 | | |
| 60. P a | rt 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. P a | rt 7: Total other property not listed, line 54 | \$0.00 | | |
| 62. T o | tal personal property. Add lines 56 through 61 | \$26,865.95 | Copy personal property total | \$26,865.95 |
| | | | | |

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$64,235.95

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| Fill in this infor | mation to identify your | case: | · | | |
|---------------------|--------------------------|-------------------|-----------|-------|------------|
| Debtor 1 | Cody Ralph Hink | le | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | SOUTHERN DISTRICT | OF OHIO | | |
| Case number | | | | | |
| (if known) | | | | _ | if this is |
| | | | | amend | led filing |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | | | Specific laws that allow exemption | |
|--|---|--|---|---|--|
| | Copy the value from Check only one box for each exemption. Schedule A/B | | | | |
| 837 Ogden Road Wilmington, OH 45177 Clinton County | \$37,370.00 | | \$145,425.00 | Ohio Rev. Code Ann. § 2329.66(A)(1) | |
| Deed in Debtor's Name and Father Russell Hinkle's Name. Line from Schedule A/B: 1.1 | [| | 100% of fair market value, up to any applicable statutory limit | | |
| 2019 Kia Niro 22,000 Miles miles Title in Debtor's Name and Father | \$11,802.00 | | \$4,000.00 | Ohio Rev. Code Ann. § 2329.66(A)(2) | |
| Ittle in Debtor's Name and Father Russell L. Hinkle's Name. Line from Schedule A/B: 3.1 | | | 100% of fair market value, up to any applicable statutory limit | 2020.00(1.1)(2) | |
| Kitchen Table, Kitchen Chairs, | \$2,500.00 | | \$2,500.00 | Ohio Rev. Code Ann. § 2329.66(A)(4)(a) | |
| licrowave, Cooking Utensils, Eating tensils, Cookware, Stove, efrigerator, Living Room urnishings, Beds and Misc. ousehold Goods and Furnishings ne from Schedule A/B: 6.1 | | | 100% of fair market value, up to any applicable statutory limit | 2323.00(A)(4)(a) | |
| TVs, Computer, Printer, Cell Phone and Misc. Electronics | \$1,000.00 | | \$1,000.00 | Ohio Rev. Code Ann. § 2329.66(A)(4)(a) | |
| Line from Schedule A/B: 7.1 | | | 100% of fair market value, up to any applicable statutory limit | 2029.00(A)(+)(a) | |

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| De | eptor 1 Cody Raiph Hinkle | | | Case number (if known) | | |
|----------------------|--|--------------------------------------|---------|---|--|--|
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption | |
| | | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | | |
| | Personal Clothing Line from Schedule A/B: 11.1 | \$200.00 | | \$200.00 | Ohio Rev. Code Ann. § 2329.66(A)(4)(a) | |
| | Elle Holli Golloddie 7VB. TTT | | | 100% of fair market value, up to any applicable statutory limit | 2020:00(: 1)(: 1)(u) | |
| | Minnesota Life Insurance (Accidental Policy Only) | \$0.00 | | 100% | Ohio Rev. Code Ann. §§ 2329.66(A)(6)(b), 3911.10, | |
| В | Beneficiary: Daughter is Beneficiary Line from <i>Schedule A/B</i> : 31.1 | | | 100% of fair market value, up to any applicable statutory limit | 3911.12, 3911.14 | |
| | Cash and Deposits Line from Schedule A/B: | \$0.00 | | \$500.00 | Ohio Rev. Code Ann. § 2329.66(A)(3) | |
| | Zino nom esticado 702. | | | 100% of fair market value, up to any applicable statutory limit | 2020.00(A)(0) | |
| | Any Other Property Line from Schedule A/B: | \$0.00 | | \$1,325.00 | Ohio Rev. Code Ann. § 2329.66(A)(18) | |
| Line nom ocheane AD. | | | | 100% of fair market value, up to any applicable statutory limit | 2020.00(A)(10) | |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every 3 | | | led on or after the date of adjustmer | nt.) | |
| | Yes. Did you acquire the property covere | ed by the exemption wi | ithin 1 | ,215 days before you filed this case' | ? | |
| | □ No | | | | | |

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| | 0.000 0.10 0.10 0.10 0.10 | Document Page 18 | of 50 | | |
|----------------|---|--|--|--|-----------------------------|
| Fill | in this information to identify yo | ur case: | | | |
| Deb | tor 1 Cody Ralph Hil | nkle Middle Name Last Name | | - | |
| | tor 2 use if, filing) First Name | Middle Name Last Name | | - | |
| Unit | ed States Bankruptcy Court for the | SOUTHERN DISTRICT OF OHIO | | - | |
| Cas (if kno | e number | | | _ | if this is an ded filing |
| | icial Form 106D hedule D: Creditors | s Who Have Claims Secured | d by Propert | у | 12/15 |
| is ne | | If two married people are filing together, both are equout, number the entries, and attach it to this form. Or | | | |
| 1. Do | any creditors have claims secured b | by your property? | | | |
| | □ No. Check this box and submit | this form to the court with your other schedules. Yo | ou have nothing else t | to report on this form. | |
| | Yes. Fill in all of the information | • | | | |
| | | below. | | | |
| Part | List All Secured Claims | | Column A | Column B | Column C |
| for e | ach claim. If more than one creditor ha | more than one secured claim, list the creditor separately s a particular claim, list the other creditors in Part 2. As tical order according to the creditor's name. | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion |
| 2.1 | General Electric Credit Union | Describe the property that secures the claim: | \$32,289.00 | \$21,879.00 | \$10,410.00 |
| | Creditor's Name | 2017 Dodge Journey 60,000 Miles miles Title in Debtor's Name and Cosignor Coral Leslie Luke's Name. | | | |
| | 10485 Reading Road Cincinnati, OH 45241 | As of the date you file, the claim is: Check all that apply. Contingent | | | |
| | Number, Street, City, State & Zip Code | ☐ Unliquidated ☐ Disputed | | | |
| Who | o owes the debt? Check one. | Nature of lien. Check all that apply. | | | |
| _ | Debtor 1 only Debtor 2 only | ☐ An agreement you made (such as mortgage or sec car loan) | eured | | |
| | Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | |
| _ | at least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | |
| | Check if this claim relates to a community debt | Other (including a right to offset) Vehicle Loa | an | | |

Date debt was incurred 2017

Last 4 digits of account number

9264

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| Deb | tor 1 Cody Ralph Hinkle | | Ca | se number (if known) | | | |
|---------------|--|---|--------------------|---|---------------------------|-------------|--|
| | First Name Middle N | Name Last Name | | | | | |
| 2.2 | General Electric Credit Union | Describe the property that secures | the claim: | \$28,772.00 | \$23,604.00 | \$5,168.00 | |
| | Creditor's Name | 2019 Kia Niro 22,000 Miles r Title in Debtor's Name and Russell L. Hinkle's Name. | miles Father | | <u> </u> | | |
| | 10485 Reading Road Cincinnati, OH 45241 | As of the date you file, the claim is: apply. Contingent | Check all that | | | | |
| | Number, Street, City, State & Zip Code | Unliquidated | | | | | |
| Who | owes the debt? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | | | |
| | ebtor 1 only ebtor 2 only | ☐ An agreement you made (such as car loan) | mortgage or secur | red | | | |
| | ebtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, me | echanic's lien) | | | | |
| A | t least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | | | |
| | heck if this claim relates to a community debt | Other (including a right to offset) | Vehicle Loar | 1 | | | |
| Date | debt was incurred 2019 | Last 4 digits of account num | ber <u>5790</u> | | | | |
| 2.3 | Homepoint Financial | Describe the property that secures | the claim: | \$79,990.00 | \$74,740.00 | \$5,250.00 | |
| | Creditor's Name | 837 Ogden Road Wilmingto 45177 Clinton County Deed in Debtor's Name and Russell Hinkle's Name. | | | | | |
| | P.O. Box 790309 Saint Louis, MO 63179 | As of the date you file, the claim is: apply. Contingent | Check all that | | | | |
| | Number, Street, City, State & Zip Code | ☐ Unliquidated ☐ Disputed | | | | | |
| Who | owes the debt? Check one. | Nature of lien. Check all that apply. | | | | | |
| | ebtor 1 only | An agreement you made (such as | mortgage or secur | red | | | |
| | ebtor 2 only | car loan) | | | | | |
| | ebtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, me | echanic's lien) | | | | |
| _ | t least one of the debtors and another | ☐ Judgment lien from a lawsuit | Mortgago | | | | |
| | heck if this claim relates to a community debt | Other (including a right to offset) | Mortgage | | | | |
| Date | debt was incurred 2018 | Last 4 digits of account num | ber | | | | |
| | | | | 0444.054.0 | | | |
| | | Column A on this page. Write that num I the dollar value totals from all pages | | \$141,051.0 | | | |
| | ite that number here: | | | \$141,051.0 | 10 | | |
| Part | 2: List Others to Be Notified for | or a Debt That You Already Listed | I | | | | |
| tryin than | g to collect from you for a debt you o | oe notified about your bankruptcy for owe to someone else, list the creditor it you listed in Part 1, list the additiona his page. | in Part 1, and the | n list the collection agend | cy here. Similarly, if yo | u have more | |
| | Nama Number Ctreat City Ct-t- 9 | Zin Codo | | | | | |
| | Home Point Financial | | | On which line in Part 1 did you enter the creditor? | | | |
| | Suite 800 Dallas, TX 75206 | | _ast i dig | | | | |

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| | | | | Document | Page 20 | of 50 | | | |
|----------------------------------|---|--|------------------------------------|---|----------------------------------|-------------------------------|---|--------------------|------------------------------|
| Fill in t | this inform | ation to identify your | case: | | | | | | |
| Debtor | 1 | Cody Ralph Hinkl | Δ | | | | | | |
| Dobto. | | First Name | Middle Na | ime | Last Name | | | | |
| Debtor | | | | | | | | | |
| (Spouse | if, filing) | First Name | Middle Na | ıme | Last Name | | | | |
| United | States Ban | kruptcy Court for the: | SOUTHERN | DISTRICT OF C | OHIO | | | | |
| Case n | umber | | | | | | | | |
| (if known | | | | - | | | | ☐ Check if | f this is an |
| | | | | | | | | amende | d filing |
| Ott: -: | -1 | 4005/5 | | | | | | | |
| | | 106E/F | | | | | | | 40/45 |
| | | F: Creditors W accurate as possible. Us | | | | | | | 12/15 |
| Schedul Schedul left. Atta | e G: Execute e D: Credito ch the Cont | acts or unexpired leases ory Contracts and Unexp rs Who Have Claims Sec inuation Page to this pag ber (if known). | ired Leases (Of ured by Propert | ficial Form 106G). y. If more space is | Do not include s needed, copy | any creditors the Part you | s with partially secured need, fill it out, numbe | d claims that are | e listed in the boxes on the |
| Part 1: | List All | of Your PRIORITY Un | secured Clair | ns | | | | | |
| 1. Do | any creditor | s have priority unsecure | d claims agains | t you? | | | | | |
| | No. Go to Pa | rt 2. | | | | | | | |
| | Yes. | | | | | | | | |
| Part 2: | List All | of Your NONPRIORIT | Y Unsecured | Claims | | | | | |
| 3. Do | any creditor | s have nonpriority unsec | ured claims ag | ainst you? | | | | | |
| | No. You have | e nothing to report in this pa | art. Submit this f | orm to the court wit | h your other sche | edules. | | | |
| | Yes. | | | | | | | | |
| uns | secured claim n one credito | nonpriority unsecured clans, list the creditor separately reported a particular claim, lingular claim, lingula | for each claim. | For each claim liste | ed, identify what t | type of claim i | it is. Do not list claims al | lready included in | n Part 1. If more |
| | | | | | | | | Total | claim |
| 4.1 | Bank of | America | | Last 4 digits of ac | count number | 0029 | | | \$3,366.57 |
| | | Creditor's Name | | | | | | | |
| | P.O. Box | | | When was the del | bt incurred? | 2018 | | | |
| | | ton, DE 19886-5019 eet City State Zip Code | | As of the date you | ı file, the claim i | is: Check all t | that apply | | |
| | Who incur | red the debt? Check one. | | | | | | | |
| | ■ Debtor 1 | 1 only | | ☐ Contingent | | | | | |
| | Debtor 2 | 2 only | | ☐ Unliquidated | | | | | |
| | ☐ Debtor 1 and Debtor 2 only ☐ Disputed | | | | | | | | |
| | ☐ At least | one of the debtors and and | other | Type of NONPRIO | RITY unsecured | d claim: | | | |
| | ☐ Check i | f this claim is for a comr | nunity | ☐ Student loans | | | | | |
| | debt | a publicat to off+10 | | | | ration agreen | ment or divorce that you | did not | |
| | _ | n subject to offset? | | □ Debts to pension | | a plane ! | oth or aimiles delte | | |
| | ■ No | | | • | • | 01 / | other similar debts | | |
| | ☐ Yes | | | Other. Specify | Credit Card | 1 | | | |
| | | | | | | | | | |

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| Debu | Cody Raiph Hinkle | | Case number (if known) | |
|------|--|--|---|------------|
| 4.2 | Best Buy | Last 4 digits of account number | 3973 | \$884.39 |
| | Nonpriority Creditor's Name P.O. Box 9001007 | When was the debt incurred? | 2018 | |
| | Louisville, KY 40290-1007 Number Street City State Zip Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | , | Griodical matappi, | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharir | ng plans, and other similar debts | |
| | Yes | Other Specify Credit Card | <u>d</u> | |
| 4.3 | Capital One Bank | Last 4 digits of account number | 2312 | \$4,661.39 |
| | Nonpriority Creditor's Name P.O. Box 6492 | When was the debt incurred? | 2010 | |
| | Carol Stream, IL 60197-6492 Number Street City State Zip Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | 7.0 0 , , | 191 Official and apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt | | aration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | No | Debts to pension or profit-sharing | | |
| | Yes | Other. Specify Credit Card | <u>d</u> | |
| 4.4 | Chase Disney Rewards Nonpriority Creditor's Name | Last 4 digits of account number | 3260 | \$2,218.03 |
| | P.O. Box 6294 | When was the debt incurred? | 2018 | |
| | Carol Stream, IL 60197-6294 | _ | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | _ | | | |
| | ■ Debtor 1 only | Contingent | | |
| | Debtor 2 only | Unliquidated | | |
| | Debtor 1 and Debtor 2 only | Disputed | d alatina | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecure ☐ Student loans | a ciaini: | |
| | ☐ Check if this claim is for a community debt | | aration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | aradon agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | □Yes | Other Specify Credit Care | 1 | |

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| Debt | or 1 Cody Ralph Hinkle | Case number (if known) | |
|------|--|---|-------------|
| 4.5 | Citi | Last 4 digits of account number 4302 | \$4,709.25 |
| | Nonpriority Creditor's Name P.O. Box 9001016 | When was the debt incurred? 2018 | |
| | Louisville, KY 40290-1016 Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | _ | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify Credit Card | |
| 4.6 | Fifth Third Mortgage | Last 4 digits of account number | \$57,841.86 |
| | Nonpriority Creditor's Name 5001 Kingsley Dr. Cincinnati, OH 45227 | When was the debt incurred? 2009 | |
| | Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Foreclosure Deficiency | |
| 4.7 | General Electric Credit Union | Last 4 digits of account number 9030 | \$13,717.75 |
| | Nonpriority Creditor's Name 10485 Reading Road | When was the debt incurred? | |
| | Cincinnati, OH 45241 Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | , | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other, Specify Vehicle Deficiency | |

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| Cody Raiph Hinkle | Case number (if known) | |
|--|---|------------|
| Home Depot Nonpriority Creditor's Name | Last 4 digits of account number 7944 | \$564.87 |
| P.O. Box 9001010 Louisville, KY 40290 | When was the debt incurred? 2019 | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | lacksquare Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Other. Specify Credit Card | |
| J.C. Penney | Last 4 digits of account number 8935 | \$204.18 |
| Nonpriority Creditor's Name P.O. Box 965046 | When was the debt incurred? 2018 | |
| Orlando, FL 32896-5046 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | |
| ☐ Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | □ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | lacksquare Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Other. Specify Credit Card | |
| Kohl's | Last 4 digits of account number 5653 | \$3,690.10 |
| Nonpriority Creditor's Name P.O. Box 2983 | When was the debt incurred? 2013 | |
| Milwaukee, WI 53201-2983 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | |
| ☐ Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | ■ Other. Specify Credit Card | |

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| 1 Cody Ralph Hinkle | Case number (if known) | |
|--|--|-----------|
| Lowe's/ SYNCB | Last 4 digits of account number 9179 | \$865.0 |
| Nonpriority Creditor's Name P.O. Box 530914 | When was the debt incurred? 2018 | |
| Atlanta, GA 30353-0914 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | _ |
| Debtor 1 only | ☐ Contingent | |
| ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | ☐ Unliquidated ☐ Disputed | |
| ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt | Type of NONPRIORITY unsecured claim: Student loans | |
| Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts |)t |
| □ Yes | Other. Specify Credit Card | |
| Mohela | Last 4 digits of account number | \$1,590.0 |
| Nonpriority Creditor's Name P.O. Box 105347 Atlanta, GA 30348 | When was the debt incurred? | _ |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| Debtor 1 only | Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| ☐ At least one of the debtors and another☐ Check if this claim is for a community | Student loans | |
| debt Is the claim subject to offset? | \square Obligations arising out of a separation agreement or divorce that you did no report as priority claims | ot |
| ■ No | $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | Other. Specify | |
| | Student Loans | |
| Paypal Credit Nonpriority Creditor's Name | Last 4 digits of account number 5895 | \$2,759.7 |
| P.O. Box 5136 Lutherville Timonium, MD 21094 | When was the debt incurred? 2013 | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | Unliquidated | |
| Debtor 1 and Debtor 2 only | Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: Student loans | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did no report as priority claims | ot |
| ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| □ Yes | ■ Other Specify Credit Card | |

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| Jebi | OF I Cody Raiph Hinkle | Case number (if known) | |
|----------|--|--|-------------|
| 4.1 4 | Russell Hinkle | Last 4 digits of account number | \$36,000.00 |
| | Nonpriority Creditor's Name 4884 St. Rt. 133 N | When was the debt incurred? | |
| | Clarksville, OH 45113 Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | \square Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify Loan | |
| 1.1 5 | SYNCB/ Car Care | Last 4 digits of account number 1410 | \$3,649.22 |
| | Nonpriority Creditor's Name | W/L | |
| | P.O. Box 965052 Orlando, FL 32896-5052 | When was the debt incurred? 2016 | |
| | Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | \square Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Credit Card | |
| Į.1 S | SYNCB/ Care Credit | Last 4 digits of account number 4242 | \$8,991.06 |
| | Nonpriority Creditor's Name P.O. Box 960061 | When was the debt incurred? 2016 | |
| | Orlando, FL 32896 Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | As of the date you me, the damnis. Oneon an tract appry | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | Check if this claim is for a community | Student loans | |
| | debt Is the claim subject to offset? | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | □ Yes | ■ Other Specify Credit Card | |
| | — 153 | - Umer Specify Growing Gurd | |

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5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

On which entry in Part 1 or Part 2 did you list the original creditor?

Part 3: List Others to Be Notified About a Debt That You Already Listed

| Bank of America P.O. Box 982238 | Line 4.1 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | | | | |
|---|--|---|--|--|--|--|
| El Paso, TX 79998-2235 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| | Last 4 digits of account number | | | | | |
| Name and Address | | 2 did you list the original creditor? | | | | |
| Best Buy/ CBNA | Line 4.2 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | | | | |
| P.O. Box 6497 Sioux Falls, SD 57117 | | Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| Gloda Falls, GD 37 FF7 | Last 4 digits of account number | | | | | |
| Name and Address | On which entry in Part 1 or Part | 2 did you list the original creditor? | | | | |
| Capital One Bank | Line 4.3 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | | | | |
| P.O. Box 30281 Salt Lake City, UT 84130 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| Sait Lake City, O1 04130 | Last 4 digits of account number | | | | | |
| Name and Address | On which entry in Part 1 or Part | 2 did you list the original creditor? | | | | |
| Chase | Line 4.4 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | | | | |
| P.O. Box 15369 Wilmington, DE 19850 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| Willington, DE 19000 | Last 4 digits of account number | | | | | |
| Name and Address | On which entry in Part 1 or Part 2 did you list the original creditor? | | | | | |
| Citicards/ CBNA | Line 4.5 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | | | | |
| P.O. Box 6190 Sioux Falls, SD 57117 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| Sioux Fails, 3D 37117 | Last 4 digits of account number | | | | | |
| Name and Address | On which entry in Part 1 or Part | 2 did you list the original creditor? | | | | |
| Home Depot/ CBNA | Line 4.8 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | | | | |
| P.O. Box 6497 Sioux Falls, SD 57117-6497 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| 310ux 1 alis, 3D 37 117-0437 | Last 4 digits of account number | | | | | |
| Name and Address | | 2 did you list the original creditor? | | | | |
| J.C. Penney | Line 4.9 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | | | | |
| P.O. Box 965007 Orlando, FL 32896-5007 | | Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| 5.1a.1a5, 1 L 02000 0001 | Last 4 digits of account number | | | | | |
| Name and Address | On which entry in Part 1 or Part | 2 did you list the original creditor? | | | | |
| Kohl's | Line 4.10 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | | | | |
| | | | | | | |

Official Form 106 E/F

Name and Address

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| Debtor 1 Cody Ralph Hinkle | | Case number (if known) | | | | |
|---|--|---|--|--|--|--|
| P.O. Box 3115 Milwaukee, WI 53201 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| , | Last 4 digits of account number | | | | | |
| Name and Address | On which entry in Part 1 or Part 2 d | id you list the original creditor? | | | | |
| Lerner, Sampson & Rothfuss | Line 4.6 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | | | | |
| 120 East Fourth Street, 8th Floor Cincinnati, OH 45202 | | Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| Gillennian, 611 45252 | Last 4 digits of account number | | | | | |
| Name and Address | On which entry in Part 1 or Part 2 d | id you list the original creditor? | | | | |
| Lowe's/ SYNCB | Line 4.11 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | | | | |
| P.O. Box 965005 Orlando, FL 32896 | | Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| | Last 4 digits of account number | | | | | |
| Name and Address | On which entry in Part 1 or Part 2 did you list the original creditor? | | | | | |
| SYNCB | Line 4.16 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | | | | |
| Attn: Bankruptcy Dept. P.O. Box 965060 | | Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| Orlando, FL 32896-5060 | | | | | | |
| · | Last 4 digits of account number | | | | | |
| Name and Address | On which entry in Part 1 or Part 2 d | id you list the original creditor? | | | | |
| SYNCB/ Car Care | Line 4.15 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | | | | |
| P.O. Box 965068 Orlando, FL 32896 | | Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| | Last 4 digits of account number | | | | | |
| Name and Address | On which entry in Part 1 or Part 2 d | · | | | | |
| Wells Fargo/ Preferred Cust. P.O. Box 14517 | Line 4.17 of (<i>Check one</i>): | Part 1: Creditors with Priority Unsecured Claims | | | | |
| Des Moines, IA 50306 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| | Last 4 digits of account number | | | | | |

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|--------------|-----|---|-----|------------------|
| | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| Total claims | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 0.00 |
| | | | | Total Claim |
| | 6f. | Student loans | 6f. | \$ 1,590.00 |
| Total claims | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 145,843.91 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 147,433.91 |

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| Fill in this infor | rmation to identify your | case: | | |
|---------------------|--------------------------|-------------------|-----------|---------------------------------|
| Debtor 1 | Cody Ralph Hink | le | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | SOUTHERN DISTRICT | OF OHIO | |
| Case number | | | | Charle if this is |
| (II KIIOWII) | | | | Check if this is amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | 1 613011 01 | Name, Number | , Street, City, State and ZIF | e contract or lease | State what the contract or lease is for |
|-----|-------------|--------------|-------------------------------|---------------------|---|
| .1 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.3 | | | | | |
| | Name | | | | |
| | Number | Street | | | <u> </u> |
| | City | | State | ZIP Code | _ |
| 2.4 | | | | | |
| | Name | | | | |
| | Number | Street | | | <u> </u> |
| | City | | State | ZIP Code | _ |
| 2.5 | - | | | | |
| | Name | | | | |
| | Number | Street | | | <u> </u> |
| | City | | State | ZIP Code | |

Case 3:19-bk-33196 Doc 1 Filed 10/15/19 Entered 10/15/19 14:35:20 Desc Main Document Page 29 of 50

| Fill in th | nis information to identify your | case: | nt 1 age 25 of 00 | |
|----------------------------------|---|--|--|--|
| Debtor 1 | Cody Ralph Hink | le | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse if, | | Middle Name | Last Name | |
| United S | States Bankruptcy Court for the: | SOUTHERN DISTRICT | OF OHIO | |
| Case nu | ımber | | | |
| (if known) | | | | ☐ Check if this is an amended filing |
| Offici | al Form 106H | | | |
| | edule H: Your Cod | ebtors | | 12/15 |
| eople a ill it out our nar | are filing together, both are equ , and number the entries in the me and case number (if known) | ally responsible for supp boxes on the left. Attach . Answer every question. | lying correct information. If n the Additional Page to this p | lete and accurate as possible. If two married nore space is needed, copy the Additional Page, age. On the top of any Additional Pages, write |
| 1. L | o you have any codebtors? (If | you are ming a joint case, c | do not list either spouse as a co | debior. |
| | | | | |
| Y | 'es | | | |
| | Vithin the last 8 years, have yo u cona, California, Idaho, Louisiana, | | | nmunity property states and territories include and Wisconsin.) |
| | No. Go to line 3. | | | |
| _ | es. Did your spouse, former spou | use, or legal equivalent live | with you at the time? | |
| in li For | ne 2 again as a codebtor only i | f that person is a guarant | tor or cosigner. Make sure yo | spouse is filing with you. List the person shown u have listed the creditor on Schedule D (Official se Schedule D, Schedule E/F, or Schedule G to file |
| | Column 1: Your codebtor Name, Number, Street, City, State and ZI | P Code | | dumn 2: The creditor to whom you owe the debt eck all schedules that apply: |
| 3.1 | Coral Leslie Luke 975 Xenia Avenue, Apt. J Wilmington, OH 45177 | | | Schedule D, line2.1 Schedule E/F, line Schedule G neral Electric Credit Union |
| 3.2 | Russell Hinkle 4884 St. Rt. 133 N Clarksville, OH 45113 | | | Schedule D, line2.3 Schedule E/F, line Schedule G mepoint Financial |
| 3.3 | Russell Hinkle 4884 St. Rt. 133 N Clarksville, OH 45113 | | | Schedule D, line2.2_ Schedule E/F, line Schedule G neral Electric Credit Union |

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| Fill | in this information to identify | v vour ca | 60. | | | | | | | | |
|------|---|------------|----------------------|------------------------------|---------------|-----|----------|---------------|-------------------------|-------------------------|----------|
| | | Ralph | | | | | | | | | |
| | otor 2 ouse, if filing) | - | | | | | | | | | |
| Uni | ted States Bankruptcy Court | t for the: | SOUTHERN DISTRIC | T OF OHIO | | | | | | | |
| | se number nown) | | | | | | | | ed filing ent showin | ng postpetition | |
| 0 | fficial Form 106I | | | | | | | MM / DD/ Y | YYYY | | |
| S | chedule I: Your | Inco | ome | | | | | | | | 12/15 |
| atta | tase. If you are separated a ch a separate sheet to this Describe Employ Fill in your employment information. | form. (| | | | | | number (if | known). A | | |
| | If you have more than one | ioh | | ■ Employed | | | | ☐ Empl | | 9 - | |
| | attach a separate page wit information about additional | th | Employment status | ☐ Not employe | ed | | | | mployed | | |
| | employers. | | Occupation | Associate | | | | | | | |
| | Include part-time, seasona self-employed work. | al, or | Employer's name | Donato's | | | | | | | |
| | Occupation may include st or homemaker, if it applies | | Employer's address | 860 Rombach Wilmington, 0 | | | | | | | |
| | | | How long employed to | here? 8 Yes | ars | | | | | | |
| Par | rt 2: Give Details Abo | out Mon | thly Income | | | | | | | | |
| spou | mate monthly income as o use unless you are separated | d. | | · | · | | | | · | • | J |
| | u or your non-filing spouse he space, attach a separate s | | | embine the informa | ation for all | emp | oyers fo | or that perso | on on the li | nes below. If | you need |
| | | | | | | | For D | ebtor 1 | | btor 2 or ing spouse | |
| 2. | List monthly gross wage deductions). If not paid mo | | | | 2. | \$ | | 2,575.00 | \$ | N/A | |
| 3. | Estimate and list monthly | y overti | me pay. | | 3. | +\$ | | 0.00 | +\$ | N/A | |
| 4. | Calculate gross Income. | Add lin | e 2 + line 3. | | 4. | \$ | 2, | 575.00 | \$ | N/A | |

Official Form 106I Schedule I: Your Income page 1

| Debt | or 1 | Cody Ralph Hinkle | _ | Case r | number (if known) | | | |
|------|--------------------|---|--------|-------------|-------------------|-------------------|---------------------|----------|
| | | | | For | Debtor 1 | For Del | btor 2 or | |
| | | | | 1 01 | Debtor 1 | | ng spouse | |
| | Cop | by line 4 here | 4. | \$ | 2,575.00 | \$ | N/A | |
| 5. | List | all payroll deductions: | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$ | 515.00 | \$ | N/A | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | \$ | 0.00 | \$ | N/A | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$ | 0.00 | \$ | N/A | |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$ | 0.00 | \$ | N/A | |
| | 5e. | Insurance | 5e. | \$ | 0.00 | \$ | N/A | |
| | 5f. | Domestic support obligations | 5f. | \$ | 0.00 | \$ | N/A | |
| | 5g. | Union dues | 5g. | \$ | 0.00 | \$ | N/A | |
| | 5h. | Other deductions. Specify: | 5h.+ | - \$ | 0.00 | + \$ | N/A | |
| 6. | | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ | 515.00 | \$ | N/A | |
| 7. | Cal | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 2,060.00 | \$ | N/A | |
| 8. | List 8a. | t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | | |
| | | monthly net income. | 8a. | \$ | 0.00 | \$ | N/A | |
| | 8b. | Interest and dividends | 8b. | \$ | 0.00 | \$ | N/A | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | \$ | 0.00 | \$ | N/A | |
| | 8d. | | 8d. | <u>\$</u> — | 0.00 | \$ | N/A | |
| | 8e. | Social Security | 8e. | \$ | 0.00 | \$ | N/A | |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f. | \$ | 0.00 | \$ | N/A | |
| | 8g. | Pension or retirement income | 8g. | \$ | 0.00 | \$ | N/A | |
| | 8h. | Other monthly income. Specify: | 8h.+ | - \$ | 0.00 | + \$ | N/A | |
| 9. | Add | d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 0.00 | \$ | N/A | |
| 10. | | culate monthly income. Add line 7 + line 9. If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. \$ | | 2,060.00 + \$_ | N | 1/A = \$ | 2,060.00 |
| 11. | Incl othe Do | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not excify: | depen | | • | ed in <i>Sche</i> | edule J. 11. +\$ | 0.00 |
| 12. | | If the amount in the last column of line 10 to the amount in line 11. The restet that amount on the Summary of Schedules and Statistical Summary of Certallies | | | | , if it | 12. \$ | 2,060.00 |
| | | | | | | | Combine | |
| 13. | | you expect an increase or decrease within the year after you file this form | ? | | | | montnly | income |
| | | Yes. Explain: | | | | | | |

Official Form 106l Schedule I: Your Income page 2

| Fill | in this informa | tion to identify yo | our case: | | | | | | | | |
|---|-----------------------|--|------------------|---|---------------------------|---------------------------------------|-------------|------------------|----------------------------------|---|-------|
| Deb | | Cody Ralph | | | | | Ch | eck if | this is: | | |
| | | | | | | | | An | amended filing | | |
| Debtor 2 (Spouse, if filing) | | | | | | | | | | wing postpetition chapt the following date: | er |
| United States Bankruptcy Court for the: SOUTHERN DISTRICT OF OHIO | | | | | | MM / DD / YYYY | | | | | |
| Office | eu States Bariki | upicy Court for the | . 30011 | ILKN DISTRICT OF C | OFFIC | | | IVIIV | 1/00/1111 | | |
| | e number nown) | | | | | | | | | | |
| Of | ficial Fo | rm 106J | | | | | | | | | |
| | | J: Your | | | | | | | | | 12/15 |
| info | rmation. If m | and accurate as ore space is ne n). Answer eve | eded, atta | ch another sheet to | ple are fili this form | ing together, be n. On the top of | oth are eq | ıually tional | responsible fo pages, write y | or supplying correct your name and case | |
| Part | | ibe Your House | hold | | | | | | | | |
| 1. | Is this a joir | | | | | | | | | | |
| | ■ No. Go to | | in a aanar | ata hayaahald? | | | | | | | |
| | □ Yes. Doe | | ın a separ | ate household? | | | | | | | |
| | | | st file Offici | al Form 106J-2, <i>Expe</i> | enses for | Separate House | ehold of De | ebtor 2 | 2. | | |
| 2. | Do vou have | e dependents? | □ No | | | | | | | | |
| | Do not list Debtor 2. | • | Yes. | Fill out this information each dependent | | ependent's relati ebtor 1 or Debto | | | Dependent's age | Does dependent live with you? | |
| | Do not state | the | | | | | | _ | | □ No | |
| | dependents | names. | | | | Daughter | | | 10 | Yes | |
| | | | | | | | | | | □ No □ Yes | |
| | | | | | _ | | | | | □ No | |
| | | | | | | | | | | ☐ Yes | |
| | | | | | | | | | | □ No | |
| 3. | Do your exp | enses include | | No | _ | | | | | ☐ Yes | |
| | • | f people other to d your depende | han $_{\square}$ | Yes | | | | | | | |
| exp | imate your ex | | our bankr | uptcy filing date unle | | | | | | apter 13 case to repo f the form and fill in t | |
| the | | n assistance an | | government assistar luded it on <i>Schedul</i> | | | | | Your exp | enses | |
| , | | , | | | | | | | | | |
| 4. | | or home owners and any rent for the | | ses for your residen r lot. | nce. Inclu | de first mortgage | 4. | \$_ | | 645.00 | |
| | If not includ | led in line 4: | | | | | | | | | |
| | 4a. Real e | estate taxes | | | | | 4a. | \$ | | 0.00 | |
| | | rty, homeowner's | | | | | 4b. | · — | | 0.00 | |
| | | maintenance, re owner's associat | | ipkeep expenses | | | 4c. 4d. | | | 50.00 0.00 | |
| 5. | | | | our residence, such a | as home e | equity loans | 4u. 5. | | | 0.00 | |

| Debtor 1 Cody Ralph Hinkle | Case number (if known) |
|--|---|
| 6. Utilities: | |
| 6a. Electricity, heat, natural gas | 6a. \$ 150. |
| 6b. Water, sewer, garbage collection | 6b. \$ 40. |
| 6c. Telephone, cell phone, Internet, satellite, and cable serv | |
| 6d. Other. Specify: | 6d. \$ 0. |
| Food and housekeeping supplies | 7. \$ 400. |
| Childcare and children's education costs | 8. \$ 0. |
| Clothing, laundry, and dry cleaning | 9. \$ |
|). Personal care products and services | 10. \$ 50. |
| . Medical and dental expenses | · |
| Transportation. Include gas, maintenance, bus or train fare. | 11. \$ 25. |
| Do not include car payments. | 12. \$ 200. |
| 3. Entertainment, clubs, recreation, newspapers, magazines, | and books 13. \$ 50. |
| Charitable contributions and religious donations | 14. \$ 0. |
| . Insurance. | · |
| Do not include insurance deducted from your pay or included in | n lines 4 or 20. |
| 15a. Life insurance | 15a. \$ 17. |
| 15b. Health insurance | 15b. \$ 0. |
| 15c. Vehicle insurance | 15c. \$ 151. |
| 15d. Other insurance. Specify: | 15d. \$ 0. |
| . Taxes. Do not include taxes deducted from your pay or include | · |
| Specify: | 16. \$ 0. |
| 7. Installment or lease payments: | |
| 17a. Car payments for Vehicle 1 | 17a. \$ 461. |
| 17b. Car payments for Vehicle 2 | 17b. \$ 0. |
| 17c. Other. Specify: Storage Unit | 17c. \$ 32. |
| 17d. Other. Specify: | 17d. \$ 0. |
| Your payments of alimony, maintenance, and support that | |
| deducted from your pay on line 5, Schedule I, Your Income | Ciliciai i Oilli 1001). |
| Other payments you make to support others who do not li Specific. | ve with you. \$ |
| Specify: | |
| 20a. Mortgages on other property | 20a. \$ 0. |
| 20b. Real estate taxes | 20b. \$ 0. |
| | |
| 20c. Property, homeowner's, or renter's insurance | |
| 20d. Maintenance, repair, and upkeep expenses | |
| 20e. Homeowner's association or condominium dues | 20e. \$0. |
| . Other: Specify: Pet Care | 21. +\$ 80. |
| . Calculate your monthly expenses | |
| 22a. Add lines 4 through 21. | \$ 2,696.00 |
| 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from | n Official Form 106J-2 \$ |
| 22c. Add line 22a and 22b. The result is your monthly expense | |
| | |
| 3. Calculate your monthly net income. | -dula I 00- ft |
| 23a. Copy line 12 (your combined monthly income) from Scho | |
| 23b. Copy your monthly expenses from line 22c above. | 23b\$ 2,696. |
| 23c Subtract your monthly expanses from your monthly inco | me |
| Subtract your monthly expenses from your monthly incommunity income. | 23c. \$ -636. |
| The result to your menting net mounts. | L |
| | vithin the year after you file this form? year or do you expect your mortgage payment to increase or decrease becau: |
| modification to the terms of your mortgage? | · · · · · |
| ■ No. | |
| □ Voc Evolain here: | |

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| Fill in this infor | mation to identify your | case: | | | |
|-------------------------------------|--|--------------------------|-------------------------|------------------------------|--|
| Debtor 1 | Cody Ralph Hinkl | e | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | SOUTHERN DISTRICT | OF OHIO | | |
| Case number (if known) | | | | | ☐ Check if this is an amended filing |
| Official For | m 106Dec | | | | |
| Declarat | tion About a | ın Individual | Debtor's | Schedules | 12/15 |
| obtaining mone years, or both. 1 | | n connection with a bank | | | ement, concealing property, or 00, or imprisonment for up to 20 |
| Did you pa | ay or agree to pay some | one who is NOT an attor | rney to help you fill o | out bankruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. | Name of person | | | | kruptcy Petition Preparer's Notice, , and Signature (Official Form 119) |
| | alty of perjury, I declare re true and correct. | that I have read the sum | mary and schedules | s filed with this declaratio | on and |
| X /s/ Co | dy Ralph Hinkle | | X | | |
| Cody | Ralph Hinkle ire of Debtor 1 | | Signatur | re of Debtor 2 | |

Date _____

Date **October 15, 2019**

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| Fil | I in this inform | nation to identify you | r case: | | | | | | | | | |
|------------|---|---|--|-------------|---|---|------------|---|--|--|--|--|
| De | btor 1 | Cody Ralph Hin | | | | | | | | | | |
| D. | htor O | First Name | Middle Name | | Last Name | | | | | | | |
| 1 - | ebtor 2 ouse if, filing) | First Name | Middle Name | | Last Name | | | | | | | |
| Un | ited States Bar | nkruptcy Court for the: | SOUTHERN DISTRI | ICT OF O | HIO | | | | | | | |
| Ca | ise number | | | | | | | | | | | |
| (if k | nown) | | | | | | _ | eck if this is an nended filing | | | | |
| \bigcirc | fficial Ear | m 107 | | | | | | | | | | |
| | fficial For | | Affairs for Ind | ividua | ls Filing for B | ankruntev | | 4/1: | | | | |
| | | | ible. If two married peo | | | | for sunn | | | | | |
| info | ormation. If me | ore space is needed | attach a separate shee | | | | | | | | | |
| | <u> </u> | n). Answer every que | | | | | | | | | | |
| Pa | rt 1: Give D | etails About Your Ma | arital Status and Where | You Live | d Before | | | | | | | |
| 1. | What is your | current marital statu | ıs? | | | | | | | | | |
| | ☐ Married | | | | | | | | | | | |
| | Not mari | ried | | | | | | | | | | |
| 2. | During the last 3 years, have you lived anywhere other than where you live now? | | | | | | | | | | | |
| | □ No | □ No. | | | | | | | | | | |
| | _ | t all of the places you | ived in the last 3 years. | Do not incl | lude where you live now | ٧. | | | | | | |
| | Dobtor 1 Bri | ior Address: | Dates Debt | or 1 | Debtor 2 Prior Ac | ldroos | | Dates Debtor 2 | | | | |
| | Debior 1 Fil | or Address. | lived there | | Debtor 2 Prior At | iuress. | | lived there | | | | |
| | 160 Rando Apt. 4B Wilmington | olph Street n, OH 45177 | From-To: 1/2014 - 1 | 1/2018 | ☐ Same as Debtor | 1 | | ☐ Same as Debtor 1 From-To: | | | | |
| | tes and territorion ■ No □ Yes. Ma | es include Arizona, Ca | ver live with a spouse of the lifernia, Idaho, Louisiana the dule H: Your Codebton or Income | a, Nevada, | New Mexico, Puerto R | | | | | | | |
| 4. | Did you have Fill in the tota If you are filin No | e any income from er I amount of income yo | nployment or from ope u received from all jobs have income that you re | and all bus | sinesses, including part | -time activities. | ous calend | dar years? | | | | |
| | | | Debtor 1 | | | Debtor 2 | | | | | | |
| | | | Sources of income Check all that apply. | (b | ross income efore deductions and cclusions) | Sources of income Check all that apply | | Gross income (before deductions and exclusions) | | | | |
| | | | | | | | | | | | | |

Official Form 107

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| Debtor 1 | Cody Ralph Hinkle | Document 1 a | Case number (if known) | |
|----------|-------------------|--------------|------------------------|--|
| | | | | |

| | | | | | Dahtan 4 | | | Dahtar 0 | | |
|----|----------|------------------|-------------------------|--|---|-------------------------|--|--|----------------|---|
| | | | | | Debtor 1 | _ | | Debtor 2 | | |
| | | | | | Sources of income Check all that apply. | (before | s income re deductions and sions) | Sources of inc Check all that a | | Gross income (before deductions and exclusions) |
| | | | | ■ Wages, commissions, bonuses, tips | ,,, | | | ☐ Wages, commissions, bonuses, tips | | |
| | | | | | ☐ Operating a business | | | ☐ Operating a | business | |
| | | | dar year: December | 31, 2018) | ■ Wages, commissions, bonuses, tips | | \$29,131.00 | ☐ Wages, com bonuses, tips | missions, | |
| | | | | | ☐ Operating a business | | | Operating a | business | |
| | | | dar year be December | | ■ Wages, commissions, bonuses, tips | | \$20,287.00 | ☐ Wages, com bonuses, tips | missions, | |
| | | | | | ☐ Operating a business | | | Operating a | business | |
| | win | nings. each s | If you are fil | ing a joint cas | pensions; rental income; inter e and you have income that y me from each source separa | you recei | ved together, list it o | only once under De | ebtor 1. | d gambling and lottery |
| | | | | | Dahtan 4 | | | Dahtan 0 | | |
| | | | | | Debtor 1 Sources of income Describe below. | each (befor | s income from source re deductions and sions) | Debtor 2 Sources of inc Describe below | | Gross income (before deductions and exclusions) |
| Pa | rt 3: | List | Certain Pa | ayments You | Made Before You Filed for | Bankrup | otcy | | | |
| 6. | Are □ | eithei No. | Neither D | ebtor 1 nor D | s debts primarily consumer ebtor 2 has primarily consu- personal, family, or househo | umer del | ots. Consumer debt | s are defined in 11 | U.S.C. § 10 | 1(8) as "incurred by an |
| | | | During the | 90 days befo | re you filed for bankruptcy, di | id you pa | y any creditor a tota | al of \$6,825* or mo | re? | |
| | | | □ Yes | List below e paid that cre not include | each creditor to whom you pai editor. Do not include paymer payments to an attorney for the on 4/01/22 and every 3 years | nts for do his bankr | mestic support obliquetcy case. | gations, such as ch | nild support a | nd alimony. Also, do |
| | | Yes. | | | r both have primarily consure you filed for bankruptcy, di | | | ıl of \$600 or more? | , | |
| | | | ■ No. | Go to line 7 | | | | | | |
| | | | □ Yes | List below e include pay | each creditor to whom you pai ments for domestic support o this bankruptcy case. | | | | | |
| | Cr | editor' | s Name an | d Address | Dates of payme | ent | Total amount | Amount you | Was this p | payment for |

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Cody Ralph Hinkle Case number (if known)

| 7. | Within 1 year before you filed for bankr Insiders include your relatives; any genera of which you are an officer, director, perso | uptcy, did you make a paym | ent on a debt you o | | | |
|-----|---|--|---|--|--------------------------------------|--|
| 7. | Insiders include your relatives; any general of which you are an officer, director, person | uptcy, did you make a paym | ent on a debt you o | _ | | |
| | a business you operate as a sole proprieto alimony. | in in control, or owner of 20% or. 11 U.S.C. § 101. Include pa | neral partners; partners partners or more of their voting | erships of which you g securities; and ar | u are a general p ny managing age | eartner; corporation nt, including one fo |
| | ■ No | | | | | |
| | ☐ Yes. List all payments to an insider. | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for th | is payment |
| 8. | Within 1 year before you filed for bankr insider? Include payments on debts guaranteed or | | ments or transfer a | any property on a | ccount of a deb | t that benefited an |
| | No | | | | | |
| | ☐ Yes. List all payments to an insider | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for th Include credito | |
| Pa | art 4: Identify Legal Actions, Reposses | sions, and Foreclosures | | | | |
| 9. | Within 1 year before you filed for bankr List all such matters, including personal in modifications, and contract disputes. | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Case title Case number | Nature of the case | Court or agency | | Status of the | case |
| 10. | Within 1 year before you filed for bankr Check all that apply and fill in the details b | | erty repossessed, f | oreclosed, garnis | hed, attached, s | seized, or levied? |
| | No. Go to line 11. | | | | | |
| | Yes. Fill in the information below. | | | | | |
| | Creditor Name and Address | Describe the Property | | Date | | Value of the property |
| | Conoral Electric Credit Union | Explain what happene | d | Max | 2040 | ¢0.00 |
| | General Electric Credit Union 10485 Reading Road | 2012 Chevy Volt | | May | 2019 | \$0.00 |
| | Cincinnati, OH 45241 | ■ Property was reposse | essed. | | | |
| | | Property was foreclos | | | | |
| | | ☐ Property was garnish | | | | |
| | | ☐ Property was attache | ed, seized or levied. | | | |
| 11. | Within 90 days before you filed for bank accounts or refuse to make a payment No Yes. Fill in the details. | | luding a bank or fil | nancial institution | , set off any am | ounts from your |
| | Creditor Name and Address | Describe the action the | e creditor took | | action was | Amount |
| 12. | Within 1 year before you filed for bankr | | erty in the possess | taken ion of an assigned | | of creditors, a |
| | court-appointed receiver, a custodian, | or another official? | | | | |
| | ■ No □ Yes | | | | | |

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| Del | otor 1 | Cody Ralph Hinkle | | | ase number (ii | f known) | |
|-----|-----------------------|--|----------|---|----------------|-----------------------------------|---------------------------|
| Par | t 5: | List Certain Gifts and Contribution | s | | | | |
| 13. | | n 2 years before you filed for bankr No Yes. Fill in the details for each gift. | uptcy, d | did you give any gifts with a total valu | ue of more tha | an \$600 per person? | |
| | Gifts per p | with a total value of more than \$60 person | 0 | Describe the gifts | | Dates you gave the gifts | Value |
| | Perso Addr | on to Whom You Gave the Gift and ress: | | | | | |
| 14. | | n 2 years before you filed for bankr No Yes. Fill in the details for each gift or c | | did you give any gifts or contributions | s with a total | value of more than S | 6600 to any charity? |
| | Gifts more Char | or contributions to charities that to than \$600 oity's Name Tess (Number, Street, City, State and ZIP Code | otal | Describe what you contributed | | Dates you contributed | Value |
| Par | t 6: | List Certain Losses | | | | | |
| 15. | or gar | n 1 year before you filed for bankru mbling? No | ptcy or | since you filed for bankruptcy, did yo | ou lose anyth | ing because of theft | , fire, other disaster, |
| | | es. Fill in the details. | | | | | |
| | | cribe the property you lost and the loss occurred | Include | ibe any insurance coverage for the love the amount that insurance has paid. Lich the claims on line 33 of Schedule A/B: F | st pending | Date of your loss | Value of property lost |
| Par | t 7: | List Certain Payments or Transfers | 3 | | | | |
| 16. | Includ | ulted about seeking bankruptcy or placed about seeking bankruptcy petition placed any attorneys, bankruptcy petition p | prepari | id you or anyone else acting on your lang a bankruptcy petition? s, or credit counseling agencies for serv | | , , , | ty to anyone you |
| | = ' | No Yes. Fill in the details. | | | | | |
| | Addr Emai | on Who Was Paid ress il or website address on Who Made the Payment, if Not Y | ou' | Description and value of any prope transferred | erty | Date payment or transfer was made | Amount of payment |
| | 576 Suite | old Jarnicki and Associates Mound Court e B anon, OH 45036 | | Attorney Fees | | 9/27/2019 | \$1,100.00 |
| 17. | promi | | ditors o | id you or anyone else acting on your l or to make payments to your creditors ted on line 16. | | transfer any proper | ty to anyone who |
| | I | No | | | | | |
| | □ Y | es. Fill in the details. | | | | | |
| | Perso | on Who Was Paid ress | | Description and value of any prope transferred | erty | Date payment or transfer was | Amount of payment |

made

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Debtor 1 Cody Ralph Hinkle

Case number (if known)

| 18. | tran Inclu | nin 2 years before you filed for bankrupt sferred in the ordinary course of your bude both outright transfers and transfers made gifts and transfers that you have alread No Yes, Fill in the details. | usin ade a | ess or financial affa as security (such as | airs? the granting of a | | | | | |
|-----|---------------|---|---------------|---|----------------------------|------------|---------------|--|------|---|
| | Per | rson Who Received Transfer dress | | Description and v | | | payme | be any property or ents received or debts a exchange | | Date transfer was nade |
| | Per | rson's relationship to you | | | | | , , , , , , , | o.cgo | | |
| 19. | | nin 10 years before you filed for bankrup eficiary? (These are often called asset-pro No Yes, Fill in the details. | | | y property to a | a self- | settled | d trust or similar device | of v | which you are a |
| | Naı | me of trust | | Description and v | alue of the pro | operty | trans | ferred | | Date Transfer was |
| | | | | | | | | | n | nade |
| Par | t 8: | List of Certain Financial Accounts, Ins | strun | nents, Safe Deposi | t Boxes, and S | Storage | e Units | 5 | | |
| 20. | solo | nin 1 year before you filed for bankruptc I, moved, or transferred? ude checking, savings, money market, c | • | • | | | | | • | , , |
| | hou ■ | ses, pension funds, cooperatives, associ No | | | | | ороси | , onaroo iii bariile, oroa | | mene, z. enerage |
| | | Yes. Fill in the details. | | | | | | | | |
| | | me of Financial Institution and dress (Number, Street, City, State and ZIP e) | | st 4 digits of count number | Type of acco | ount o | r | Date account was closed, sold, moved, or transferred | | Last balance before closing or transfer |
| 21. | | you now have, or did you have within 1 y h, or other valuables? | year | before you filed for | bankruptcy, a | any sa | fe dep | osit box or other depo | sito | ry for securities, |
| | | No | | | | | | | | |
| | | Yes. Fill in the details. | | | | | | | | |
| | | me of Financial Institution dress (Number, Street, City, State and ZIP Code) | | Who else had acc Address (Number, S State and ZIP Code) | | Des | cribe t | he contents | | Do you still have it? |
| 22. | _ | e you stored property in a storage unit o | or pla | ace other than your | home within | 1 year | before | e you filed for bankrup | tcy? | • |
| | | No | | | | | | | | |
| | No | Yes. Fill in the details. | | Who else has or l | | Dee | ariba t | ha aantanta | | De veu etill |
| | | me of Storage Facility dress (Number, Street, City, State and ZIP Code) | | to it? Address (Number, S State and ZIP Code) | | | | ne contents | | Do you still have it? |
| | 164 | well Storage 4 S. Mulberry St. Imington, OH 45177 | | | | Mis God | | neous Household | | □ No ■ Yes |
| | | | | | | | | | | |
| Par | t 9: | Identify Property You Hold or Control | for S | Someone Else | | | | | | |
| 23. | | you hold or control any property that so someone. | meo | ne else owns? Incl | ude any prope | rty yo | u borr | owed from, are storing | for, | or hold in trust |
| | = | No | | | | | | | | |
| | П | Yes. Fill in the details. | | | | | | | | |
| | | rner's Name dress (Number, Street, City, State and ZIP Code) | | Where is the prop (Number, Street, City, S Code) | | Des | cribe t | the property | | Value |

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Debtor 1 Cody Ralph Hinkle

Case number (if known)

| Part 10: | Give Details | About | Environmental | Information |
|----------|--------------|--------------|----------------------|-------------|
|----------|--------------|--------------|----------------------|-------------|

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
 Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.

| | | means any location, facility, or propert wn, operate, or utilize it, including disp | - | | aw, | whether you now own, operate, | or utilize it or used |
|-----|--------|---|-------|--|------------------------|---|-----------------------|
| | | <i>ardous material</i> means anything an env ardous material, pollutant, contaminant | | | wa | ste, hazardous substance, toxic | substance, |
| Rep | ort a | II notices, releases, and proceedings th | nat y | ou know about, regardless of when | the | ey occurred. | |
| 24. | Has | any governmental unit notified you tha | at yo | u may be liable or potentially liable | une | der or in violation of an environm | ental law? |
| | | No Yes. Fill in the details. | | | | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | | Governmental unit Address (Number, Street, City, State and ZIP Code) | t | Environmental law, if you know it | Date of notice |
| 25. | Hav | e you notified any governmental unit of | f any | y release of hazardous material? | | | |
| | | No Yes. Fill in the details. | | | | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | | Governmental unit Address (Number, Street, City, State and ZIP Code) | t | Environmental law, if you know it | Date of notice |
| 26. | Hav | e you been a party in any judicial or ad | mini | strative proceeding under any envi | ron | mental law? Include settlements | and orders. |
| | | No Yes. Fill in the details. | | | | | |
| | | se Title se Number | | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Na | ture of the case | Status of the case |
| Pa | rt 11: | Give Details About Your Business or | Coı | nnections to Any Business | | | |
| 27. | Witl | nin 4 years before you filed for bankrup | tcy, | did you own a business or have an | y of | f the following connections to any | y business? |
| | | ☐ A sole proprietor or self-employed | in a | trade, profession, or other activity, | eith | ner full-time or part-time | |
| | | ☐ A member of a limited liability comp | pany | y (LLC) or limited liability partnersh | ip (l | LLP) | |
| | | ☐ A partner in a partnership | | | | | |
| | | ☐ An officer, director, or managing ex | xecu | tive of a corporation | | | |
| | | ☐ An owner of at least 5% of the votin | ng o | r equity securities of a corporation | | | |
| | | No. None of the above applies. Go to | Part | 12. | | | |
| | | Yes. Check all that apply above and fil | ll in | the details below for each business | i. | | |
| | Ad | siness Name dress | De | escribe the nature of the business | | Employer Identification number Do not include Social Security | |
| | (Nui | mber, Street, City, State and ZIP Code) | Na | ame of accountant or bookkeeper | Dates business existed | | |
| | | | | | | | |

Case 3:19-bk-33196 Doc 1 Filed 10/15/19 Entered 10/15/19 14:35:20 Desc Main Page 41 of 50 Document Case number (if known) Debtor 1 Cody Ralph Hinkle 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No ☐ Yes. Fill in the details below. **Date Issued** Name **Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Cody Ralph Hinkle Signature of Debtor 2 **Cody Ralph Hinkle** Signature of Debtor 1 Date October 15, 2019 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Southern District of Ohio

| | | | | Case No. | | |
|-------------|--|---|---|--|---------------------------|--------------|
| | | | Debtor(s) | Chapter | 7 | |
| | DIS | CLOSURE OF COME | PENSATION OF ATTO | RNEY FOR DI | EBTOR(S) | |
| C | ompensation paid to | me within one year before the | 016(b), I certify that I am the atto filing of the petition in bankruptc on of or in connection with the ba | y, or agreed to be paid | to me, for services ren | dered or to |
| | For legal service | es, I have agreed to accept | | s | 1,100.00 | |
| | Prior to the filing | g of this statement I have receiv | red | s | 1,100.00 | |
| | Balance Due | | | \$ | 0.00 | |
| 2. \$ | 335.00 of the | filing fee has been paid. | | | | |
| 3. T | he source of the cor | mpensation paid to me was: | | | | |
| | Debtor | ☐ Other (specify): | | | | |
| 4. T | he source of compe | nsation to be paid to me is: | | | | |
| | Debtor | ☐ Other (specify): | | | | |
| 5. I | I have not agreed | I to share the above-disclosed co | ompensation with any other perso | n unless they are mem | abers and associates of 1 | my law firm. |
| [| | | ensation with a person or persons names of the people sharing in th | | | w firm. A |
| 5. I | n return for the abov | ve-disclosed fee, I have agreed t | o render legal service for all aspe | cts of the bankruptcy | case, including: | |
| b c | Preparation and fi Representation of [Other provisions Negotiatio | iling of any petition, schedules, f the debtor at the meeting of cre as needed] | endering advice to the debtor in destatement of affairs and plan white editors and confirmation hearing, to reduce to market value; exations as needed; | ch may be required; and any adjourned hea | nrings thereof; | |
| 7. B | Represent any other | tation of the debtors in any adversary proceeding; pre | d fee does not include the following dischargeability actions, judiparation and filing of motion d filing of motions for redem | dicial lien avoidand is pursuant to 522(| f)(2)(A) for avoidanc | |
| | | | CERTIFICATION | | | |
| | certify that the foreg | | f any agreement or arrangement for | or payment to me for 1 | representation of the del | btor(s) in |
| O | tober 15, 2019 | | /s/ Harold Jarnio | cki | | |
| Do | | | Harold Jarnicki | #0027595 | | |
| | | | Signature of Attori Harold Jarnicki | | | |
| | | | 576 Mound Cou | rt, Suite B | | |
| | | | Lebanon, OH 45 | 5036 Fax: (513) 932-544 | 2 | |
| | | | Name of law firm | rax. (313) 932-344 | J | |

| Fill in this info | ormation to identify your case: | | | | | irected in this form and | d in Form |
|---|---|--|--------------------------------------|-------------------------|---------------------------------|--|-----------------------------------|
| Debtor 1 | Cody Ralph Hinkle | | 122 | 2A-1Sup | p: | | |
| Debtor 2 (Spouse, if filing) | | | | ■ 1. The | ere is no pres | umption of abuse | |
| United States | Bankruptcy Court for the: Southern District | of Ohio | | ар | plies will be n | o determine if a presu nade under <i>Chapter 7</i> icial Form 122A-2). | |
| Case number | r | | , | _ | | | annuan of |
| , | | | | | | does not apply now book service but it could ap | |
| | | | | ☐ Ched | ck if this is a | n amended filing | |
| Official I | Form 122A - 1 | | | | | | |
| Chapte | r 7 Statement of Your Cui | rrent Mor | nthly Inc | ome | | | 12/1 |
| attach a separa case number (i qualifying milit | e and accurate as possible. If two married people ate sheet to this form. Include the line number to very fixed the state of the state | which the addition m a presumption otion from Presum | nal information a of abuse becau | applies. C se you do | n the top of aid not have pring | ny additional pages, wri narily consumer debts o | te your name and or because of |
| _ | your marital and filing status? Check one or | nly. | | | | | |
| | married. Fill out Column A, lines 2-11. ied and your spouse is filing with you. Fill o | ut both Columna | A and D. lines | 0.44 | | | |
| | ied and your spouse is ming with you. Fill o ied and your spouse is NOT filing with you. | | , | Z-11. | | | |
| | ving in the same household and are not lega | - | - | lumns A | and R lines 3 | 2-11 | |
| _ | ving separately or are legally separated. Fill | • • | | | , | | u declare under |
| pe | enalty of perjury that you and your spouse are lying apart for reasons that do not include evadi | egally separated | l under nonban | kruptcy l | aw that applie | es or that you and you | |
| 101(10A). F the 6 month | verage monthly income that you received from all or example, if you are filing on September 15, the 6-n s, add the income for all 6 months and divide the tota n the same rental property, put the income from that p | nonth period would I by 6. Fill in the res | be March 1 throusult. Do not include | ugh Augus de any inc | st 31. If the amo | ount of your monthly incor ore than once. For examp | ne varied during ble, if both |
| | | | , , | Column Debtor | A | Column B Debtor 2 or non-filing spouse | |
| | oss wages, salary, tips, bonuses, overtime, deductions). | and commission | ons (before all | \$ | 2,573.85 | \$ | |
| | y and maintenance payments. Do not include B is filled in. | payments from | a spouse if | \$ | 0.00 | \$ | |
| of you of from an and room | unts from any source which are regularly por your dependents, including child support unmarried partner, members of your household mmates. Include regular contributions from a spon on the include payments you listed on line 3. | . Include regular d, your depender | contributions nts, parents, | \$ | 0.00 | \$ | |
| | ome from operating a business, profession, | or farm | | ·— | | * | |
| | | | tor 1 | | | | |
| Gross re | eceipts (before all deductions) | \$ 0.00 | | | | | |
| - | y and necessary operating expenses | -\$ 0.00 | Copy here -> | ¢ | 0.00 | \$ | |
| | othly income from a business, profession, or far | m \$ | copy nere -> | Φ | 0.00 | Ψ | |
| 6. Net inco | ome nom remai and other real property | Deb | tor 1 | | | | |
| Gross re | eceipts (before all deductions) | \$ 0.00 | | | | | |
| | and necessary operating expenses | -\$ 0.00 | | | | | |
| Net mor | nthly income from rental or other real property | \$ 0.00 | Copy here -> | \$ | 0.00 | \$ | |
| 7. Interest | , dividends, and royalties | | | \$ | 0.00 | \$ | |

Official Form 122A-1

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| | Cody Ralph Hinkle | | | Case number | er (<i>if known</i>) | | | |
|---------------------------------|---|--|----------------------|-------------------|--|--|----------------|-----------|
| | | | | Column A Debtor 1 | | Column B Debtor 2 or | | |
| Une | nemployment compensation | | | \$ | 0.00 | \$ | | |
| | o not enter the amount if you contend that the amount e Social Security Act. Instead, list it here: | received was a benef | it under | | | | | |
| F | For you \$ | 0.0 | 00 | | | | | |
| F | For your spouse \$ | | | | | | | |
| | ension or retirement income. Do not include any amerit under the Social Security Act. | ount received that wa | s a | \$ | 0.00 | \$ | | |
| Do rece don | come from all other sources not listed above. Specton not include any benefits received under the Social Society as a victim of a war crime, a crime against hum mestic terrorism. If necessary, list other sources on a real below. | ecurity Act or paymen nanity, or international | ts or | | | | | |
| | • | | | \$ | 0.00 | \$ | | |
| | | | | \$ | 0.00 | \$ | | |
| | Total amounts from separate pages, if any. | | + | \$ | 0.00 | \$ | | |
| | alculate your total current monthly income. Add line ch column. Then add the total for Column A to the total | | \$ | 2,573.85 | + \$ | | = \$_ | 2,573.85 |
| | alculate your current monthly income for the year. a. Copy your total current monthly income from line 1 | | | Сор | y line 11 l | nere=> | \$ | 2,573.85 |
| | , | | | · | | | | |
| | Multiply by 12 (the number of months in a year) | | | | | | Х | 12 |
| 12b | b. The result is your annual income for this part of the | form | | | | 12b | . \$ | 30,886.20 |
| | | | | | | | | |
| Cal | alculate the median family income that applies to y | ou. Follow these step | os: | | | | | |
| | alculate the median family income that applies to y | OH | os: | | | | | |
| Fill | | | os: | | | | | |
| Fill Fill Fill To | I in the state in which you live. | OH 2 of household. online using the link specified in the second | | in the separ | | | \$ | 62,308.00 |
| Fill Fill To | I in the state in which you live. I in the number of people in your household. I in the median family income for your state and size of find a list of applicable median income amounts, go of | OH 2 of household. online using the link specified in the second | | | | | \$ | 62,308.00 |
| Fill Fill To | I in the state in which you live. I in the number of people in your household. I in the median family income for your state and size of find a list of applicable median income amounts, go of this form. This list may also be available at the bankrow do the lines compare? | OH 2 of household. online using the link spuptcy clerk's office. | oecified | in the separ | ate instruc | tions | | 62,308.00 |
| Fill Fill To | I in the state in which you live. I in the number of people in your household. I in the median family income for your state and size of find a list of applicable median income amounts, go of this form. This list may also be available at the bankrow do the lines compare? a. Line 12b is less than or equal to line 13. Or Go to Part 3. | OH 2 of household. online using the link spuptcy clerk's office. a the top of page 1, ch | pecified | in the separ | ate instruc | tions nption of abus | e. | |
| Fill Fill To for How | I in the state in which you live. I in the number of people in your household. I in the median family income for your state and size of find a list of applicable median income amounts, go of this form. This list may also be available at the bankrow do the lines compare? a. Line 12b is less than or equal to line 13. Or Go to Part 3. b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2. Sign Below | of household. online using the link spuptcy clerk's office. a the top of page 1, check box 2 | pecified neck box | in the separ | ate instruc no presun f abuse is | tions nption of abus determined by | e. y Form 1 | 22A-2. |
| Fill Fill To for How | I in the state in which you live. I in the number of people in your household. I in the median family income for your state and size of find a list of applicable median income amounts, go of this form. This list may also be available at the bankrow do the lines compare? a. Line 12b is less than or equal to line 13. Or Go to Part 3. b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2. | of household. online using the link spuptcy clerk's office. a the top of page 1, check box 2 | pecified neck box | in the separ | ate instruc no presun f abuse is | tions nption of abus determined by | e. y Form 1 | 22A-2. |
| Fill Fill To for How | I in the state in which you live. I in the number of people in your household. I in the median family income for your state and size of find a list of applicable median income amounts, go of this form. This list may also be available at the bankrow do the lines compare? a. Line 12b is less than or equal to line 13. Or Go to Part 3. b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2. Sign Below By signing here, I declare under penalty of perjury to | of household. online using the link spuptcy clerk's office. a the top of page 1, check box 2 | pecified neck box | in the separ | ate instruc no presun f abuse is | tions nption of abus determined by | e. y Form 1 | 22A-2. |
| Fill Fill To for How | I in the state in which you live. I in the number of people in your household. I in the median family income for your state and size of find a list of applicable median income amounts, go of this form. This list may also be available at the bankrow do the lines compare? a. Line 12b is less than or equal to line 13. Or Go to Part 3. b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2. Sign Below | of household. online using the link spuptcy clerk's office. a the top of page 1, check box 2 | pecified neck box | in the separ | ate instruc no presun f abuse is | tions nption of abus determined by | e. y Form 1 | 22A-2. |
| Fill Fill To for How 14a 14b 3: | I in the state in which you live. I in the number of people in your household. I in the median family income for your state and size of find a list of applicable median income amounts, go of this form. This list may also be available at the bankrow do the lines compare? a. Line 12b is less than or equal to line 13. Or Go to Part 3. b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2. Sign Below By signing here, I declare under penalty of perjury to X /s/ Cody Ralph Hinkle Cody Ralph Hinkle | of household. online using the link spuptcy clerk's office. a the top of page 1, check box 2 | pecified neck box | in the separ | ate instruc no presun f abuse is | tions nption of abus determined by | e. y Form 1 | 22A-2. |

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| (| Chapter 7: | Liquidation | |
|----------|------------|--------------------|--|
| | \$245 | filing fee | |
| | \$75 | administrative fee | |
| <u>+</u> | - \$15 | trustee surcharge | |
| | \$335 | total fee | |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| _ | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Bank of Case 3c19-bk-33196 Doc 1co Filed 10/15/49 Lu Entered 10/15/19 14:35:20 Desc Main P.O. Box 15019 97 Document Av Page, 42 pt 50 P.O. Box 3115 Wilmington, DE 19886-5019 Wilmington, OH 45177 Milwaukee, WI 53201

Bank of America Fifth Third Mortgage Lerner, Sampson & Rothfu P.O. Box 982238 5001 Kingsley Dr. 120 East Fourth Street, 8F El Paso, TX 79998-2235 Cincinnati, OH 45227 Cincinnati, OH 45202

Best Buy
P.O. Box 9001007
Cincinnati, OH 45241
General Electric Credit UnionLowe's/ SYNCB
P.O. Box 530914
Cincinnati, OH 45241
Atlanta, GA 30353-0914

Best Buy/ CBNA Home Depot Lowe's/ SYNCB P.O. Box 6497 P.O. Box 9001010 P.O. Box 965005 Sioux Falls, SD 57117 Louisville, KY 40290 Orlando, FL 32896

Capital One Bank Home Depot/CBNA Mohela P.O. Box 6492 P.O. Box 6497 P.O. Box 105347 Carol Stream, IL 60197-6492 Sioux Falls, SD 57117-6497 Atlanta, GA 30348

Capital One Bank
P.O. Box 30281
Salt Lake City, UT 84130
Home Point Financial
4849 Greenville Ave.
Suite 800
Dallas, TX 75206
Paypal Credit
P.O. Box 5136
Lutherville Timonium, MD

Chase Homepoint Financial Russell Hinkle P.O. Box 15369 P.O. Box 790309 4884 St. Rt. 133 N Wilmington, DE 19850 Saint Louis, MO 63179 Clarksville, OH 45113

Chase Disney Rewards J.C. Penney SYNCB
P.O. Box 6294 P.O. Box 965046 Attn: Bankruptcy Dept.
Carol Stream, IL 60197-6294 Orlando, FL 32896-5046 P.O. Box 965060 Orlando, FL 32896-5060

Citi J.C. Penney SYNCB/ Car Care P.O. Box 9001016 P.O. Box 965007 P.O. Box 965052 Corlando, FL 32896-5007 Orlando, FL 32896-5052

Citicards/ CBNA Kohl's SYNCB/ Car Care P.O. Box 6190 P.O. Box 2983 P.O. Box 965068 Sioux Falls, SD 57117 Milwaukee, WI 53201-2983 Orlando, FL 32896

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Wells Fargo Home Furnishings P.O. Box 71118 Charlotte, NC 28272-1118

Wells Fargo/ Preferred Cust. P.O. Box 14517 Des Moines, IA 50306